

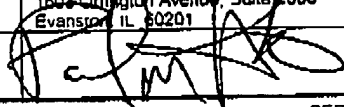
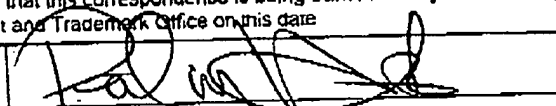
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Attorney Docket No.	NL 000045 (7790/214)
	Application Number	09/781,383
	Filing Date	FEBRUARY 12, 2001
	First Named Inventor	KAREL E KUIJK
	Group Art Unit	2873
	Examiner	PIZALI, J

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Response to Final Office Action Dated May 22, 2003 <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Status Letter <input type="checkbox"/> Petition for Extension of Time Request (duplic) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement, PTO-1449, att <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawings <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> To Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request of Refund	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Post Card Receipt <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below) <input checked="" type="checkbox"/> Request for Continued Examination (RCE) Transmittal <input type="checkbox"/> <input type="checkbox"/>
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	Claims After Amendment		Highest No Previously Paid For	Present Extra	Rate	Add'l Fee		Rate	Add'l Fee
Total		Minus		0	x \$9=	0		x \$18=	
Indep.		Minus		0	x \$42=	0		x \$84=	
First Presentation of Multiple Dep. Claim					+ \$140	--		+ \$280=	
					total add'l fee	\$ 0		total add'l fee	\$

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	PAUL M. HLETKO Registration No. 51,806 CARDINAL LAW GROUP 1603 Orrington Avenue, Suite 2000 Evanston, IL 60201	
Signature		Date August 22, 2003
CERTIFICATE OF FACSIMILE		
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To: EXAMINER JEFFREY J. PIZALI
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